



UNITED STATES PATENT AND TRADEMARK OFFICE

UNITED STATES DEPARTMENT OF COMMERCE
 United States Patent and Trademark Office
 Address: COMMISSIONER FOR PATENTS
 P.O. Box 1450
 Alexandria, Virginia 22313-1450
 www.uspto.gov

BIBDATASHEET

CONFIRMATION NO. 4892

Bib Data Sheet

SERIAL NUMBER 10/715,994	FILING DATE 11/18/2003 RULE	CLASS 607	GROUP ART UNIT 3739	ATTORNEY DOCKET NO. GVANS.001C1
-----------------------------	---------------------------------------	--------------	------------------------	------------------------------------

APPLICANTS

Greg J. VanSkiver, Hastings, NE;

Roxanne R. VanSkiver, Hastings, NE;

** CONTINUING DATA *****

This application is a CON of 10/209,310 07/31/2002 PAT 6,660,029
 which claims benefit of 60/309,327 08/01/2001

** FOREIGN APPLICATIONS *****

None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** SMALL ENTITY **

** 02/20/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY NE	SHEETS DRAWING 3	TOTAL CLAIMS 20	INDEPENDENT CLAIMS 5
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged Examiners Signature Initials				

ADDRESS

20995
 KNOBBE MARTENS OLSON & BEAR LLP
 2040 MAIN STREET
 FOURTEENTH FLOOR
 IRVINE , CA
 92614

TITLE

Hinged therapeutic mouthpiece

FILING FEE RECEIVED 471	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
-----------------------------------	---	---